

## Late Independent Expenditure Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> California League of Conservation Voters Independent Expenditures Committee			<b>Date of This Filing</b> _____ 06/14/2006 _____		Date Stamp     Page 1 of 3	<b>CALIFORNIA FORM 496</b>  For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (510)271-0900		<b>I.D. NUMBER (if applicable)</b> 1236496		<b>Report No.</b> _____ 0509SM1A2 _____		
<b>STREET ADDRESS</b>  <div> <div>CITY</div> <div>Oakland</div> </div> <div> <div>STATE</div> <div>CA</div> </div> <div> <div>ZIP CODE</div> <div>94612</div> </div>			<b>Amendment to Report No.</b> _____ 002 _____ (explain below)			
			<b>No. of Pages</b> _____ 3 _____			

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> Ellen Corbett			<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD/DISTRICT NO.</b> State Senator District 10	<b>SUPPORT</b> X	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

## 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
05/08/2006	Post Card	\$8,048.17
05/12/2006	Mailing	\$3,019.38
05/08/2006	Literature	\$955.29
05/08/2006	Consulting	\$2,000.00
05/11/2006	Editorial Services	\$650.00

Reason for Amendment:

### Additional expenditures

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<b>AREA CODE/PHONE NUMBER</b> (510)271-0900		<b>I.D. NUMBER (if applicable)</b> 1236496		<b>Report No.</b> _____ 0509SM1A2 _____		
<b>STREET ADDRESS</b>  			<input checked="" type="checkbox"/> <b>Amendment to Report No.</b> _____ 002 _____ (explain below)			
<b>CITY</b> Oakland		<b>STATE</b> CA	<b>ZIP CODE</b> 94612		<b>No. of Pages</b> _____ 3 _____	

### 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> Ellen Corbett			<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD/DISTRICT NO.</b> State Senator District 10	<b>SUPPORT</b> X	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

## 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
05/11/2006	Post Card	\$650.00

Reason for Amendment:

### Additional expenditures

# Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA**  
**FORM 496**

NAME OF FILER  
California League of Conservation Voters Independent Expenditures Committee

I.D. NUMBER (If applicable)  
1236496

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
5/8/2006	Philip Schlein Menlo Park, CA 94025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partner US Venture Partners	\$5,000.00	If loan, enter interest rate, if any _____ %
5/11/2006	California State Pipe Trades Council Political Action Fund Sacramento, CA 95814  ID: 743895	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$70,000.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

\*\*Contributor Codes  
IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 496 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
866/275-3772